it, he discovers in their "Lunacy Commission." This opinion he entertains in common with many, if not most, English writers on the subject, and also with sundry amateurs on this side the water, who, probably, would need little urging to fill the office if offered them. This they hold out as the great panacea for all the ills and evils of hospital management. The idea is that superintendents are apt to keep running in old ruts, blind to all signs of progress, and winking at improprieties, and that directors are dull, careless, moved by selfish purposes, and hood-winked by the officers of the hospital. To meet this condition of things, a commission should be appointed by the government with power to inspect the hospitals, advise changes and improvements, and report merits and defects. In England such a board, composed of twelve members appointed by the Crown, visit by sub-committees every establishment, public and private, in which insane persons are cared for, and render an annual report of their doings. Their function is strictly advisory, but the advice generally has all the force of an authoritative order. Lunacy commissions seem to be just now a sort of fashion. If one has done so much good, then, of course, it would be well to have a few more. So the London *Lancet* appoints one for itself, and sends him forth to examine the hospitals and asylums of the land, and the result of his researches has just appeared in the shape of two portly octavos. Other medical journals, we suppose, will not quietly submit to be outdone in this kind of enterprise, and, indeed, we see no reason why other journals, not medical—the Quarterly and Edinburgh Reviews, the Spectator, Athenæum, etc.—should not take a hand in this new method of promoting the public good. We have little faith in lunacy commissions, for though we would not say that the English and Scotch boards have been utterly unproductive of good, we believe it has been accompanied by no small amount of evil. But we are not going to argue the matter. If any one deliberately believes that a body of men—lawyers, merchants, country squires, and one or two doctors—most of whom, probably, were never inside of a hospital before their appointment, become competent to give advice in matters of construction, classification, and treatment, to correct shortcomings, to indicate mistakes, and suggest improvements, and all this too on the strength of one or two visits to the institutions in the course of the year, he is beyond the reach of any argument that we can use.

Some other points in the paper are suggestive of comment, but as they are of minor importance, and as we may already have trespassed on the reader's patience, we will pass them by for the present. I. R.

ART. XXXV.—*Lectures on the Diseases of the Nervous System.* Delivered at La Salpetrière, by J. M. CHARCOT, Professor to the Faculty of Medicine of Paris, etc. etc. Translated by GEORGE SEIGERSON, M.D., M.Ch. London: The New Sydenham Society, 1877, pp. 325.

ALTHOUGH the English translation of these lectures has just come to us, it is of the second French edition, and already in this country we had become more or less familiar with the work from the extensive way in which it had been quoted in our own language. For example, in the last edition of Hammond on *Diseases of the Nervous System*, published in 1876, in the chapters on hysteria, these lectures are largely quoted, and the striking wood-cuts illustrating the contortions of hystero-epilepsy are reproduced from this volume.

The lectures were delivered during a period of several years, and the second

French edition has been materially enlarged from the original, and enriched by numerous notes by Dr. Bourneville, the editor.

The work is divided into three parts. The first relates to "disorders of nutrition consequent on lesions of the brain and spinal cord." Part second embraces paralysis agitans, and disseminated sclerosis; and the third part treats of hysteria and hystero-epilepsy.

The first lectures are taken up with the consideration of lesions arising from nerve injuries, and in this connection the investigations of Drs. Mitchell, Morehouse, and Keen are referred to frequently. There is much that is interesting in the various lesions met with in the skin, muscles, and joints, as results of wounds and inflammation of nerves. We are all familiar with the herpetic eruptions in certain neuralgias, for instance in herpes zoster; but as well as this there are eczematous, leprous, and pemphigoid eruptions, and the "glossy skin," which arise from nerve injuries. Now, Prof. Charcot points out that these trophic disorders, following injuries, are the result of nerve irritation, and he states as a law, that lesions consisting in "clean and complete section" are followed by effects, generally speaking, resulting from the absence of nerve-action. On the other hand, when, "owing to contused or lacerated wounds, the lesion is of such a nature as to set up irritation in the nerve, in which case, and then only, we see arise trophical troubles." This explains how it is that, in cases of division of a nerve by the surgeon's knife, we seldom, if ever, see skin lesions following; while in the case of an accidental wound, which has apparently totally severed a nerve and destroyed its function as to motion and sensation as completely as in the other case, are seen the most extreme trophic changes in the skin.

One section is given to the consideration of bedsores, or *decubitis acutus* and *chronicus*. These, when occurring in cases of paralysis, are shown not to be the result of pressure or the irritating contact of urine, as so commonly supposed, but are due to "irritation of certain regions of the encephalon," in hemiplegia, or to irritation of the spinal cord in paraplegia; although, in the latter case, pressure exerts an important influence.

The section on arthropathies of spinal origin is of particular interest, because Prof. Charcot was an original worker in this field; and he gives to an American physician, Prof. J. K. Mitchell, the credit of having first pointed out these joint diseases in connection with spinal paralysis. The author gives a striking example of atrophy of the head of the humerus, in a case of locomotor ataxia, where, in the short space of three months, the articulating portion of the bone had almost entirely disappeared.

The lectures on paralysis agitans and disseminated sclerosis are admirable, and give the most graphic description of the two diseases that we have ever seen. In the account of disseminated sclerosis, every symptom is brought out with clearness, and the author dwells at length on the pathological anatomy of the affection; indeed, in order to make this the more readily understood, the histological anatomy of the nervous centres, especially of the spinal cord, is given. A study of the neuroglia, so important in its connection with sclerotic affections, occupies several pages.

As Prof. Charcot remarks, in the lecture on the symptomatology of disseminated sclerosis, "it is singular that a morbid state which possesses so distinct and so striking an anatomical substratum, and which, in short, is not a rare disease, should have escaped clinical analysis for such a length of time." No doubt, the circumstance of certain points of resemblance to paralysis agitans has caused it to be confounded with that disease; and many cases which have been called paralysis agitans have in reality been instances of disseminated sclerosis. No confusion need ever be made between the two affections if one would remember that in one, paralysis agitans, the tremor occurs when the patient is at rest; while, in the other, it takes place only on voluntary effort.

The occurrence of apoplectiform seizures in the course of the cerebral form of disseminated sclerosis is a notable feature in the disorder, and, according to the author, is met with in about a fifth of the cases.

The lectures on hysteria relate to hysterical ischuria, hysterical hemianæsthesia, ovarian hysteria, and hystero-epilepsy.

This portion of the work is particularly worthy of study when we consider the attention given by Prof. Charcot to this class of cases. It was he who first pointed out that, in cases of hysterical contracture of long standing, a sclerotic change may occur in the lateral columns of the spinal cord, which renders the prognosis hopeless as to return of power in the affected limbs. A case is related on page 295, in which a sclerous lesion was found occupying the lateral column throughout nearly the entire length of the cord.

Hystero-epilepsy, we are told, may be manifested in three varieties. First. Where epilepsy is the primary disease, and hysteria becomes grafted upon it. Secondly. Where epilepsy is superadded to hysteria. Thirdly. Where convulsive hysteria coexists with minor epilepsy, or where convulsive epilepsy occurs in conjunction with some of the phenomena of non-convulsive hysteria.

It is the second form which the author discusses, and his remarks go to show that it is distinct from true epilepsy.

What strikes us forcibly in reading these lectures is the absence of any consideration of the treatment of the diseases which are brought before us. In only two instances is the treatment alluded to; in connection with paralysis agitans, and in reference to compression of the ovary in hysterical convulsions. This method Charcot was led to adopt, because he had found that he could excite hysterical manifestations by ovarian pressure. One cannot but question, however, whether the same amount of pressure (that of the fist with all the strength of the operator is what is recommended by the author) would not cut short the paroxysm if applied in any region of the body.

The translation is well done by Dr. Seigerson; and his notes show how thoroughly acquainted with the subject he is.

The ten plates appended to the French edition have been omitted, but the woodcuts which illustrate the various forms of hysteria are well executed. W. S.

ART. XXXVI.—*An Atlas of Topographical Anatomy after Plane Sections of Frozen Bodies.* By WILHELM BRAUNE, Prof. Anat. Univ. Leipzig. Translated by EDWARD BELLAMY, F.R.C.S. With 31 plates and 46 wood-cuts. 4to. pp. xii., 200. Philadelphia: Lindsay & Blakiston, 1877.

THE more or less similar works of Pirogoff, Legendre, Volz, Rüdinger, etc., are somewhat rarely seen in this country, and are so useless to many for want of a translation, that we think Mr. Bellamy has done a real service to English-reading medical men by his translation of Braune's Anatomy. The original edition was of life-size and coloured, and though, on some accounts, more valuable, yet was too cumbersome and too costly for frequent or general use. Accordingly, the author issued in 1874 a smaller work, in which the plates were reproduced of half size, by means of photography, without colours. A few plates were omitted, and the text slightly altered. This is the edition which Mr. Bellamy has trans-